COMMUNITY SERVICE INFORMATION

EVIDENCE OF COMMUNITY SERVICE COMPLIANCE

(Name)	performed his/her community service requirements as a
volunteer by serving the agency/agencies verified below:	- · · · · · · · · · · · · · · · · · · ·

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DATE	AGENCY/DUTIES/COMMENTS	NUMBER HOURS WORKED	SUPERVISOR'S NAME AND PHONE NUMBER
		WORKED	

Comm-Serv-Info/Rev. 5/04